

CLAIMS ONLY

SERIAL NO. _____ FILING DATE _____

APPLICANT(S) _____

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2	2	1				
3	2					
4	2					
5	2					
6	2					
7	2					
8	2					
9	1					
10	1	1				
11	2					
12	2	2				
13	1					
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TOTAL IND.	3		1		1	
TOTAL DEP.	1	1				
TOTAL CLAIMS	2	1				

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	IND.	DEP.	IND.	DEP.	IND.	DEP.
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100						
TOTAL IND.			1		1	
TOTAL DEP.						
TOTAL CLAIMS						

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS